

(REFERENCE COPY - Not for submission)

FCC Form 399: Reimbursement Request

12033 Service: DTV Call **WWAY** Channel: 24 (UHF) Facility ID:

Sign:

File 0000028249

Number:

FRN: **0014489892** Date 03/22

> Submitted: /2018

Applicant Information

Applicant Name, Type, and Contact Information

Applicant	Address	Phone	Email	Applicant Type
WWAY-TV, LLC Doing Business As: WWAY-TV, LLC	Bobby Berry 301 Poplar Street MACON, GA 31201 United States	+1 (478) 745-4141	bberry@morrisnetwork. com	Limited Liability Company

Reimbursement Contact Name and Information

Contact Information	Applicant	Address	Phone	Email
	[Confidential]			

Preparer Contact Information

Preparer Contact Name and Information

Applicant	Address	Phone	Email
Ray Luke Project Manager Custom Specialty Services, LLC	Ray Luke 17363 Carlton Cuebas Road Gulfport, MS 39503 United States	+1 (228) 297- 2500	ray.css@att. net

Broadcaster Information and Transition Plan

Question	Response
Will the station be sharing equipment with another broadcast television station or stations (e.g., a shared antenna, co-location on a tower, use of the same transmitter room, multiple transmitters feeding a combiner, etc.)? If yes, enter the facility ID's of the other stations and click 'prefill' to download those stations' licensing information.	Yes
Briefly describe transition plan	WWAY will work with WECT and WSFX-TV to replace the current shared antenna and transmission line with a new antenna and transmission line,. Each station will supply its own transmitter. If needed WWAY will operate with temporary facilities to stay on air

Transmitters

s	Section	Question	Response
	Transmitter Related Expenses	Do you have transmitter related expenses?	Yes

Primary Transmitter

Existing Transmitter Information

Section	Question	Response
Existing Transmitter Description	Type of change	Purchase New
	Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is this transmitter currently shared with another station?	No
	Is this transmitter currently in operating condition?	Yes
Existing Transmitter	Manufacturer	
Manufacturer and Type	Model	Sigma
	Year	2003
	Туре	Inductive Output Tube
	IOT Power Type	Single
	Power Capacity	32 kW

Primary Transmitter

New Transmitter Costs

Section	Question	Response
New Transmitter	Use	Primary (Main)
	Change Type	Purchase New
	Is this a request for upgraded equipment?	No
	Manufacturer	
	Model	ULXTE-40
	Transmitter Type	Solid State
	Solid State Cooling	Liquid Cooled
	Solid State Power capacity	25.3 kW
	Justification for New Transmitter	Old transmitter not supported and will not re-tune to new channel. While the Form 399 FAQ's instruct to list this as an upgrade, it actually is not, but rather a simple replacement. See attachment.

Primary Transmitter

Other Transmitter Costs

Section	Question	Response
Section	Question	Response

Electrical Service	Service Entrance (3 phases 800A 208V)	Yes
	Switchgear (industrial 800 amp)	Yes
	Transformer (480V)	Yes
	Power	150 kVA
	Rigid Conduit and Wiring	Yes
	Size	3 inches
	Length	150.0 feet
	Other Electrical Service	No
	Description	N/A
HVAC Service	Does the replacement transmitter require HVAC Service?	Yes
	Туре	Cooling Only
	Size	5 tons
	Other Size	N/A
Transmitter Building Addition/Modification or Leasehold Improvement	Does the Transmitter Building require an addition, modification, other leashold improvement?	No
	Size	N/A
Channel 14 Costs	Is an RF Consulting Engineer needed?	N/A
	Is a channel 14 Mask Filer needed?	N/A
	Is additional field engineering time needed?	N/A
	Number of Days	N/A

Primary Transmitter

Other Transmitter Cost Not Listed

Name	Description
psip generator	need to generate psip for new channel
site survey	site survey for electrical drawing and floor plan

Antennas

Section	Question	Response
Antenna Related Expenses	Do you have antenna related expenses?	Yes

Primary Antenna

Existing Antenna Information

Section	Question	Response
Existing Antenna Description	Type of change	Retune Existing
	Antenna Use	Primary (Main)
	Description of Use	N/A
	Ownership	Owned
	Owner	N/A
	Site	N/A
	Is the existing antenna shared with another station or stations?	Yes
	Is the existing antenna directional?	No
	Is antenna in operating condition?	Yes
	Is antenna located on or in close proximity to an antenna farm?	No
Existing Antenna	Class	Full Power
Manufacturer and Type	Mounting	Top Mount
	Antenna position in stack	Not in Stac
	Polarization	Horizontal
	Туре	Broadband Panel
	Number of Stations Supported	3
	Number of Panels	56
	Design power capacity in use	95.0 %
	Lower Limit	400.00 MH

Upper Limit	600.00 MHz
Other Antenna Type	N/A
ERP: (Effective Radiated Power)	1000.0 kW
Manufacturer	Andrew
Model	ABBP14H4- HTWC4-30? 54
Year	2003

Facility ID's and Call Signs of all stations with whom the antenna is shared.

Facility ID	Call Sign
72871	WSFX-TV
48666	WECT

Primary Antenna

Adjustment to Existing Antenna

Section	Question	Response
Sweep Test of Existing Antenna	Do you need a sweep test of existing antenna?	Yes

Primary Antenna

Other Antenna Costs

Section	Question	Response
Combiner for Shared Antenna	Do you need a Combiner for a Shared Antenna?	Yes
	Туре	New
	Number of channels supported	3
	Frequencies of channels supported	RF channel
	Frequency	N/A

Enter a list of RF channel numbers.

RF Channel Number		
29		
23		
24		

Primary Antenna

Other Antenna Cost Not Listed

Information not provided.

Transmission	Section	Question	Response
Line	Transmission Line Related Expenses	Do you have transmission line related expenses?	No

Tower
Equipment
And
Rigging
Costs

Section	Question	Response
Tower Equipment or Rigging Costs Changes	Do you have tower equipment or rigging costs changes?	No

Outside Professional Services Costs

	Section	Question	Response
al	Outside Project Management Services	Do you require outside project management services?	Yes
		Number of Hours	1050
		Explanation	station is one of a group of co-owned stations all of which are subject to repack, there is no director of engineering and station has only IT engineer on staff. Co-ordination is needed for the entire group's Transition in different phases of repack
	Outside RF consulting Engineering Services	Perform engineering study for new channel assignment and antenna development	Yes

Prepare engineering section of Form FCC Construction Permit Application	Yes
For Auxiliary Facility	No
For Main Facility	Yes
Prepare engineering section of Form FCC License to Cover Application	Yes
For Auxiliary Facility	No
For Main Facility	Yes
Prepare request for Special Temporary Authority	Yes
Quantity	1
Do you have Distributed Transmission System engineering services?	N/A
Critical Facility	N/A
Terrain-Shielded Facility	N/A
Prepare and file Form FCC Construction Permit Application	Yes
For Auxiliary Facility	No
For Main Facility	Yes
Prepare and file Form FCC License to Cover Application	Yes
For Auxiliary Facility	No
For Main Facility	Yes
Prepare request for Special Temporary Authority	Yes
Quantity	1
NEPA Section 106 environmental review	No
Environmental Assessment	No
ASR Modification	No
FAA Consultation (including preparation of FAA Form 7460)	No
	-

Attorney and Other Outside Consulting Services

	Negotiation of Lease and other Matter for Shared Locations	Yes
	Prepare or Review FCC Form 399 for Reimbursement	Yes
	Address transition timing and coordination issues w/ other stations and wireless providers	Yes
RF Field Engineering Services	Comprehensive coverage verification via field study	Yes
	RF exposure measurements	Yes
	Additional Field Engineering Service	Yes
	Number of Days	5
	Justification	field testing on combined system

Outside Professional Services Costs

Other Professional Services Expenses Not Listed

Name	Description
Additional legal fees	Additional legal fees for 399 forms and progress reports

Other Expenses

Section	Question	Response
AM Pattern Disturbance	Is an Impact Study needed?	No
	Is Remediation needed?	No
Facility Expenses	Name	N/A
	Other Distributed Transmission System Expenses Not listed	N/A
	Name	N/A
	Is Notification of a Medical Facility required as a result of DTV broadcasting?	Yes
Permit and Filing Costs	Local Zoning	No
	Non-zoning permits	No
	BLM or NFS Coordination	No
	FCC Construction Permit Minor Change	Yes
	FCC License to Cover Application	Yes
	FCC Special Temporary Authority Application	Yes
Other Miscellaneous Expenses	Does this relocation require paying Disposal Costs (for equipment and other waste, net of any salvage value)?	Yes
	Does this relocation require Equipment Delivery or Handling Charges not otherwise included in individual item costs?	Yes
	Does this relocation require Equipment Storage?	No
	Does this relocation require the Development and Airing of an Announcement regarding an upcoming channel change?	Yes
	Does this relocation require MVPD Notification of a Channel Change?	Yes

Other Expenses Not Listed

Expenses Information not provided.

Cost Information

Transmitters

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Transmitter ULXTE-40	\$1,085,050.00	\$1,007,750.00		\$262,599.76	
site survey	\$17,350.00	\$17,350.00	N/A	N/A	N/A
psip generator	\$14,500.00	\$14,500.00	N/A	N/A	N/A
5 Ton system	\$20,250.00	\$19,250.00	N/A	N/A	N/A
3" Rigid Conduit and Wiring (Cost per foot)	\$7,800.00	\$7,350.00	N/A	N/A	N/A
Transformer 3 phase /480v - 150 KVA	\$25,550.00	\$24,300.00	N/A	N/A	N/A
Switchgear - industrial 800 amp	\$38,200.00	\$36,300.00	N/A	N/A	N/A
Service entrance 3 phase/800 amp/208 volt	\$14,400.00	\$13,700.00	N/A	N/A	N/A
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	\$947,000.00	\$875,000.00	N/A	\$262,599.76	N/A
Sub-total	\$1,085,050.00	\$1,007,750.00	N/A	\$262,599.76	N/A

Total for all	\$1,564,100.00	\$1,511,744.00	N/A	\$346,477.25	N/A
systems					

Components

Actual Information Description	File Name	
site survey	Information not provided.	
psip generator	Information not provided.	
5 Ton system	Information not provided.	
3" Rigid Conduit and Wiring (Cost per foot)	Information not provided.	
Transformer 3 phase/480v - 150 KVA	Information not provided.	
Switchgear - industrial 800 amp	Information not provided.	
Service entrance 3 phase /800 amp/208 volt	Information not provided.	
UHF - Liquid Cooled Solid State Transmitter 21 - 31 kW	Component Description: Amount:	Quote from Gates and station PO N/A
	Component Description: Amount:	1/3 down payment on transmitter \$262,599.76

Cost Information

Antennas

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Primary Antenna ABBP14H4- HTWC4-30? 54	\$96,190.00	\$137,559.00		\$58,718.75	
UHF - High Power Top Mount Three Station broadband panel antenna horizontally polarized	\$0.00	\$0.00	N/A	N/A	N/A
Sweep test of existing antenna	\$6,730.00	\$6,400.00	N/A	N/A	N/A
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	\$5,260.00	\$5,000.00	N/A	N/A	N/A

New	\$84,200.00	\$126,159.00	This cost is	\$58,718.75	You will
combiner, cost per			above catalog		see that the repack
channel			because		combiner,
(without			the		building,
antenna)			channel		and tower
antenna)			combiner,		
			mask filter		expense estimates
			and load		for stations
			are shared		WWAY
					and WEC
			by 3		
			stations, but owned		are split
					two ways. These two
			by 2, and		stations
			by contract cost for 3 is		
					are
			split 2		partners ir Brunswick
			ways. Tax		Tower LLC
			and		which
			shipping still to be		_
					owns the
			added See		tower,
			attached		building,
			ERI letter		antennas,
			of		line,
			explanation.		
Sub-total	\$96,190.00	\$137,559.00	N/A	\$58,718.75	N/A
Total for all systems	\$1,564,100.00	\$1,511,744.00	N/A	\$346,477.25	N/A

Components

Actual Information Description	File Name
UHF - High Power Top Mount Three Station broadband panel antenna horizontally polarized	Information not provided.
Sweep test of existing antenna	Information not provided.
Pattern scatter analysis for side mount high/med power antennas (if not included in antenna base cost)	Information not provided.

New combiner, cost per channel (without antenna)

Component Description: WSFX lease

Agreement with WWAY and WECT

Amount: N/A

Component Description: Tower Lease

agreement

Amount: N/A

Component Description: ERI Justification

letter for Invoice #

WWAY-001

Amount: N/A

Component Description: ERI proposal for 3

station combiner cost paid by WWAY and

WECT 50/50 split each station

Amount: N/A

Component Description: ERI Technical

Proposal for WWAY, WECT and WSFX

Amount: N/A

Component Description: 3-Channel

Combiner, Please see ERI letter of explanation of cost, attached hereto. Total cost for 3 stations is divided 2 ways by

contractual

obligation. WWAY is responsible \$117,437.50 this invoice is for WWAY 50% deposit tax and shipping added at

end

Amount: \$58,718.75

Cost Transmission Line

Information Information not provided.

Cost Tower Equipment and Rigging Costs

Information Information not provided.

Cost Information

Outside Professional Services

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Outside Professional Services	\$339,570.00	\$323,750.00		\$25,158.74	
Additional legal fees	\$8,500.00	\$8,500.00	N/A	N/A	N/A
Additional Field Engineering Service, 5 Days	\$25,000.00	\$25,000.00	Additional costs have been added here based on ERI field service costs which will total \$16,950. See ERI letter of explanation, dated 11/28 /2017, attached hereto.	\$0.00	N/A
RF Exposure Measurements	\$21,050.00	\$20,000.00	N/A	N/A	N/A
Comprehensive coverage verification via field study, if needed	\$84,200.00	\$80,000.00	N/A	N/A	N/A

Attorney Fees - Prepare and File request for Special Temporary Authorization	\$3,680.00	\$3,500.00	N/A	\$1,226.25	N/A
Attorney Fees - Negotiation of lease and other matters for shared locations	\$4,210.00	\$4,000.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), License to Cover Application	\$2,365.00	\$2,250.00	N/A	N/A	N/A
Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	\$5,260.00	\$5,000.00	N/A	\$675.00	N/A
Prepare request for Special Temporary Authorization	\$2,050.00	\$1,500.00	N/A	N/A	N/A
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	\$1,580.00	\$1,500.00	N/A	N/A	N/A
Perform engineering study for new channel assignment and antenna development	\$7,360.00	\$7,000.00	N/A	N/A	N/A

Total for all systems	\$1,564,100.00	\$1,511,744.00	N/A	\$346,477.25	N/A
Sub-total	\$339,570.00	\$323,750.00	N/A	\$25,158.74	N/A
Prepare engineering section of FCC Form 2100 (main), Construction Permit Application	\$3,155.00	\$3,000.00	N/A	N/A	N/A
Project management of the transition	\$165,900.00	\$157,500.00	N/A	\$21,487.50	N/A
Prepare and or review reimbursement form	\$2,630.00	\$2,500.00	N/A	\$1,769.99	N/A
Address transition timing and coordination issues w/ other stations and wireless	\$2,630.00	\$2,500.00	N/A	N/A	N/A

Components

Actual Information Description	File Name	
Additional legal fees	Information not provided.	
Additional Field Engineering Service, 5 Days	Component Description: Amount:	50 percent deposit on ERI field service in connection with UHF combiner and mask filter installation. \$8,475.00
RF Exposure Measurements	Information not provided.	

Comprehensive coverage verification via field study, if needed	Information not provided.	
Attorney Fees - Prepare and File request for Special Temporary Authorization	Component Description: Amount:	Provided legal information and advise regarding grant of STA for transition phase change. \$112.50
	Component Description: Amount:	Legal fees in connection with preparation and filing of STA request for change in transition phase. Prior month's charges and courtesy discount omitted from reimbursement request. \$1,113.75
Attorney Fees - Negotiation of lease and other matters for shared locations	Information not provided.	
Attorney Fees -Prepare and File FCC Form 2100 (main), License to Cover Application	Information not provided.	

Attorney Fees - Prepare and File FCC Form 2100 (main), Construction Permit Application	Component Description:	Legal advice and assistance in preparing and filing FCC Form 2100; fees billed in prior months and service charges omitted from this reimbursement request and reimbursement for other elements requested separately.
	Amount:	\$562.50
	Component Description:	Provided legal advice as to required preparation of Form 2100 and required timing of same.
	Amount:	\$112.50
Prepare request for Special Temporary Authorization	Information not provided.	
Prepare engineering section of FCC Form 2100 (main), License to Cover Application	Information not provided.	
Perform engineering study for new channel assignment and antenna development	Information not provided.	
Address transition timing and coordination issues w/ other stations and wireless	Information not provided.	
Prepare and or review reimbursement form		

Component Description: Legal services in

connection with providing further information related to FCC Form 1876 and figuring out apparently inconsistent information; fees billed in prior months and service

months and service charges omitted

from this

reimbursement

request.

Amount: \$540.00

Component Description: Legal fees and

costs for preparing and submitting FCC Form 1876 to

obtain

reimbursement of

expenses.

Amount: \$464.99

Component Description: Legal fees for

preparation and filing of Schedule 399 and obtaining

necessary

information; fees billed in prior

months and service charges omitted

from this

reimbursement

request.

Amount: \$652.50

Component Description: Provided legal

advice as to

information needed and timing required

for cost

reimbursement

forms.

Amount: \$112.50

Project management of the transition

Component Description: OCT. 2017 invoice

for project

management hours

Amount: \$2,475.00

Component Description: NOV. 2017 invoice

for project

management hours

Amount: \$8,325.00

Component Description: Jan. 2018 invoice

for project

management hours

Amount: \$1,575.00

Component Description: DEC. 2017 for

project

management hours

Amount: \$1,687.50

Component Description: FEB 2018 INVOICE

FOR PROJECT MANAGEMENT

HOURS

Amount: \$7,425.00

Prepare engineering section of FCC Form 2100 (main), Construction Permit Application Information not provided.

Cost Information

Other Expenses

Where no predetermined cost estimate is available, any estimate provided will also become the predetermined cost (displayed in italics).

Description	Predetermined Cost Estimate	Estimated Cost	Estimated Cost Justification	Actual Cost	Actual Cost Justification
Other Expenses	\$43,290.00	\$42,685.00		\$0.00	
MVPD Notification of Channel Change	\$300.00	\$300.00	N/A	N/A	N/A
Develop and air announcement of upcoming channel change	\$300.00	\$300.00	N/A	N/A	N/A
Equipment Delivery and Handling Charges	\$19,500.00	\$19,500.00	N/A	N/A	N/A
Disposal Costs (for equipment and other waste, net of any salvage value)	\$10,000.00	\$10,000.00	N/A	N/A	N/A
FCC Filing Fees - Special Temporary Authorization request	\$195.00	\$190.00	N/A	N/A	N/A
FCC Filing Fees - Form 2100 license to cover application	\$335.00	\$325.00	N/A	N/A	N/A

FCC Filing Fees - Form 2100 minor change CP application	\$1,110.00	\$1,070.00	N/A	N/A	N/A
DTV Medical Facility Notification	\$11,550.00	\$11,000.00	N/A	N/A	N/A
Sub-total	\$43,290.00	\$42,685.00	N/A	\$0.00	N/A
Total for all systems	\$1,564,100.00	\$1,511,744.00	N/A	\$346,477.25	N/A

Components

Information not provided.

Cost Information

Grand Total

	Predetermined Cost Estimate	Estimated Cost	Actual Cost
Total for all systems	\$1,564,100.00	\$1,511,744.00	\$346,477.25

Reimbursement Status The facility

entestion	Response
The facility has ceased operating on its pre- auction channel.	No
Construction of final facilities or all necessary modifications are complete.	No
All receipts for reimbursement have been submitted no further costs are expected to be incurred. Note this will lock the Form 399 from further editing and begin close-out procedures with the Fund Administrator.	No

Section Question Response

Submission of Estimated Expenses Statements

WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT.

- 1. The Authorized
 Person signing
 below certifies that he
 /she is authorized to
 submit this TV
 Broadcaster
 Relocation Fund
 Reimbursement
 Form on behalf of
 the above-named
 entity.
- 2. The above-named entity acknowledges that all certifications and attached documentation are considered material representations.
- 3. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.

- 4. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (broadcasters) or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 5. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 6. The above-named entity certifies that it will maintain and provide to the Commission detailed records, including receipts, of all costs eligible for reimbursement actually incurred.
- 7. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.

8. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a pre-requisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the abovenamed applicant for the Authorization(s) specified above. Bobby
Berry
Chief
Operating
Officer

03/22/2018

Section Question Response

Submission of Actual Cost Documentation Statements

WILLFUL FALSE, FRAUDULENT, OR FICTITIOUS STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND /OR IMPRISIONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a) (1), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503), AND ANY FALSE AND/OR FRAUDULENT STATEMENTS COULD SUBJECT THIS ENTITY TO LIABILITY UNDER THE FALSE CLAIMS ACT (U.S. CODE, TITLE 31, SECTIONS 3729-3733).

- 1. The Authorized
 Person signing
 below certifies and
 represents that he
 /she is authorized to
 submit this TV
 Broadcaster
 Relocation Fund
 Reimbursement
 Form on behalf of
 the above-named
 entity.
- The above-named entity certifies that the statements in this form and attached documentation are true, complete, and correct.
- The above-named entity acknowledges that all certifications and attached documentation are considered material representations.

- 4. The above-named entity acknowledges the submission of the information herein creates no obligation on the part of the government to pay any amount.
- 5. The above-named entity certifies that the equipment and services paid for with money from the TV Broadcaster Relocation Fund are necessary to change channels (full power and Class A stations) and/or otherwise modify a television station's facility as a result of the spectrum repack (LPTV/TV Translator stations); or to minimize service disruption resulting from a repacked television station (FM stations); or to continue to carry the signal of a broadcaster that changes channels (MVPD).
- 6. The above-named entity certifies that all payments from the TV Broadcaster Relocation Fund (Fund) received by the entity listed on this form will be used only for expenses that are eligible for reimbursement from the Fund.
- 7. The above-named entity certifies that the cost information /documents submitted reflect costs actually incurred.

- 8. The above-named entity acknowledges that overpayments or payments in error must be promptly refunded to the Commission.
- 9. The above-named entity certifies that it is in full compliance with all statutes, rules, regulations and governmental requirements for which compliance is a prerequisite for obtaining the payments herein requested.

I declare, under penalty of perjury, that I am an authorized representative of the abovenamed applicant for the Authorization(s) specified above. Bobby
Berry
Chief
Operating
Officer

03/22/2018

Attachments